

ORIGINAL

IN THE UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION

FILED
U.S. DISTRICT COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION

2016 JUL 26 AM 11:59

CLERK OF COURT

ERIC C. DARDEN, as Administrator of the §
Estate of Jermaine Darden, §
Plaintiff, §

CIVIL ACTION NO. 4:15-CV-221-A

v. §

THE CITY OF FORT WORTH, TEXAS, et al., §
Defendants. §

**DEFENDANTS' APPENDIX IN
SUPPORT OF THEIR RESPONSE TO PLAINTIFF'S
MOTION TO STRIKE AND/OR EXCLUDE DEFENDANTS'
DESIGNATED EXPERT AND ACCOMPANYING TESTIMONY**

Defendants W.F. Snow, J. Romero, and the City of Fort Worth, Texas, jointly file this their
Appendix in Support of Their Response to Plaintiffs' Motion to Strike and/or Exclude Defendants'
Designated Expert and Accompanying Testimony:

Exh.	Description	App. pages
A	Report of Tasha Greenberg, M.D., with CV	1-18
B	Autopsy Report - Jermaine Darden	19-37
C	Excerpts from the deposition of Tasha Greenberg, M.D.	17-20

Respectfully submitted,



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ATTORNEY FOR DEFENDANT
W.F. SNOW



Laetitia Coleman Brown
Senior Assistant City Attorney
State Bar No. 0072417
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ATTORNEY FOR DEFENDANT,
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ATTORNEY FOR DEFENDANT,
J. ROMERO

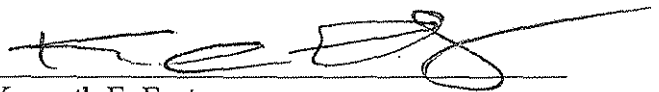
CERTIFICATE OF SERVICE

I hereby certify that on July 26, 2016, I served a copy of this document on the following parties or their counsel of record:

DARYL K. WASHINGTON
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Kenneth E. East

A

EXHIBIT A

IN THE UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION

ERIC C. DARDEN, as Administrator of the
Estate of Jermaine Darden,
Plaintiff,

v.

THE CITY OF FORT WORTH, TEXAS, et al.,
Defendants.

§
§
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CIVIL ACTION NO. 4:15-CV-221-A

DEFENDANT W.F. SNOW and J. ROMERO'S DISCLOSURE OF EXPERTS

TO THE HONORABLE JUDGE OF SAID COURT:

Pursuant to the Court's Order Setting Schedule and Providing Special Pretrial Instructions (Doc. No. 56), as amended (Doc. No. 59) and Fed. R. Civ. P. 26(a)(2), Defendants W.F. Snow and J. Romero serve this their Disclosure of Experts, and would respectfully show unto the Court as follows:

I.

Witnesses required to provide a written report. Fed. R. Civ. P. 26(a)(2)(B)

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1075 Wetland Ridge Circle
Middleburg, FL 32068
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REPORT ENCLOSED

DEFENDANT W.F. SNOW and J. ROMERO'S DISCLOSURE OF EXPERTS

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Tasha Zemrus Greenberg, M.D.¹
200 Feliks Gwozdz PL, Fort Worth TX 76104
Office (817) 920-5700 x 8364
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REPORT ENCLOSED

II.

Witnesses not required to provide a written report. Fed. R. Civ. P. 26(a)(2)(C)

Without waiving the right to challenge any other parties' attempt to elicit testimony from any non-retained expert witness that exceeds the scope and intent of Fed. R. Civ. P. 26(a)(2), Defendant may call the following persons (for purposes consistent with the scope and intent of Fed. R. Civ. P. 26(a)(2)), who are not retained or specially employed to provide expert testimony in this case and who are not regularly employed by the defendant to provide expert testimony, to present evidence under Rules 702, 703, or 705 of the Federal Rules of Evidence. Defendant also reserves the right to challenge the testimony of any person listed below should another party attempt to offer testimony from the person that is unreliable or for which the person is unqualified to opine.

1. Defendant Officer W.F. Snow by and through his undersigned attorney, Kenneth E. East, 9001 Airport Freeway, Suite 675, North Richland Hills, Texas 76180, 817-788-1111.

Based on his years' of experience as a police officer, his firsthand memory of the incident in question, and his review of the available video footage of the incident in question and the other case documents in the critical police incident report package, this officer is expected to testify as to the reasonableness of the actions at all relevant times of the police officer defendants herein,

¹ Dr. Greenberg is a fact witness, a non-retained expert, and a retained expert.

including that the officers acted reasonably at all times during their entry into the home and service of the warrant and their interaction with Jermaine Darden and that the defendant officers violated none of Plaintiffs' or Jermaine Darden's clearly established rights. The witness is expected to testify that the force used by each officer at all relevant times was reasonable and not violative of any person's clearly established rights. The witness is further expected to testify that the defendant officers acted in reasonable reliance on the information provided them by fellow officers and in reliance on the probable cause found by an independent magistrate to serve the warrant. The witness is expected to testify that the force used, including the actions that led to Plaintiff being on the ground, exposed to a Taser, and handcuffed was reasonable and that the injury or illness suffered by Jermaine Darden was not the result of any excessive use of force or any other alleged improper action or inaction by defendants.

2. Defendant Officer J. Romero, by and through his attorney of record, D. Lee Thomas, Jr., 507 W. Central Avenue, Fort Worth, Texas 76164, 817-625-8866.

Based on his years' of experience as a police officer, his firsthand memory of the incident in question, and his review of the available video footage of the incident in question and the other case documents in the critical police incident report package, this officer is expected to testify as to the reasonableness of the actions at all relevant times of the police officer defendants herein, including that the officers acted reasonably at all times during their entry into the home and service of the warrant and their interaction with Jermaine Darden and that the defendant officers violated none of Plaintiffs' or Jermaine Darden's clearly established rights. The witness is expected to testify that the force used by each officer at all relevant times was reasonable and not violative of any person's clearly established rights. The witness is further expected to testify that the defendant

officers acted in reasonable reliance on the information provided them by fellow officers and in reliance on the probable cause found by an independent magistrate to serve the warrant. The witness is expected to testify that the force used, including the actions that led to Plaintiff being on the ground, exposed to a Taser, and handcuffed was reasonable and that the injury or illness suffered by Jermaine Darden was not the result of any excessive use of force or any other alleged improper action or inaction by defendants.

3. All police officers who witnessed all or part of the incident, were involved in any way in any work done in preparation for the service of the warrant at issue herein, were involved in any investigation or review of the incident, or otherwise have knowledge relevant to this lawsuit. Such individuals can be reached through Laetitia Coleman Brown, Attorney for Defendant City of Fort Worth, Laetitia Coleman Brown, Fort Worth City Attorney's Office, 1000 Throckmorton St., Fort Worth, Texas 76102, 817-392-6639. Otherwise, their work address generally is Fort Worth Police Department, 350 West Belknap Street Fort Worth, TX 76102, (817) 392-4000. Such other police officers include, but are not limited to the following:

DANFORD,NB #2506	drafted search warrant and related documents, wrote incident report
C.M. Gilmore #3008	acted as evidence custodian
CPL J Sutherland 343 OFC C Brady 2687 OFC E Chavez 3520 OFC C Gray 3855 OFC W Snow 3450 OFC J Ricks 3484 OFC S Tabor 3662 OFC J Romero 3648	members of Central ZT team, which served subject warrant
Officer GD Sprout 3290	confirmed warrants of arrestees

Sgt RE Johnson 2478 AD Taylor #3604 J Sandoval 3625 CM Jones 3767 CM Gilmore 3008 JE Bell 3816 NB Danford	narcotics officers who searched scene
Detective D.G. Rohloff #2522 D.L. BAGGOTT, ID 2186 Det. Murtaugh	worked on CPI investigation of subject incident
Officer M. Kaether, ID #3893 Officer A. Brewer, ID #3979	present at scene and were at hospital with Jermaine Darden after incident
Officer Campbell	at hospital with Jermaine Darden after incident
Officer Jeannes	CSSU officers who collected evidence after incident
Lt. Verrett	may have responded to scene

Based each of these officer's years' of experience as a police officer, his or her firsthand memory of the facts from the incident in question or the investigation thereof (see notes above), and his or her review of the available video footage of the incident in question and the other case documents in the critical police incident report package, each officer is expected to testify as to the reasonableness of the actions at all relevant times of the police officer defendants herein, including that the officers acted reasonably at all times during their entry into the home and service of the warrant and their interaction with Jermaine Darden and that the defendant officers violated none of Plaintiffs' or Jermaine Darden's clearly established rights. The witnesses are expected to testify that the force used by each officer at all relevant times was reasonable and not violative of any person's clearly established rights. The witnesses are further expected to testify that the defendant officers acted in reasonable reliance on the information provided them by fellow officers and in reliance

on the probable cause found by an independent magistrate to serve the warrant. The witness is expected to testify that the force used, including the actions that led to Plaintiff being on the ground, exposed to a Taser, and handcuffed was reasonable and that the injury or illness suffered by Jermaine Darden was not the result of any excessive use of force or any other alleged improper action or inaction by defendants.

4. Officer Jamie Johnson. Officer Johnson can be reached through Laetitia Coleman Brown, Attorney for Defendant City of Fort Worth, Laetitia Coleman Brown, Fort Worth City Attorney's Office, 1000 Throckmorton St., Fort Worth, Texas 76102, 817-392-6639. Otherwise, his work address generally is Fort Worth Police Department, 350 West Belknap Street Fort Worth, Texas 76102, (817) 392-4000.

Based on his years' of experience as a police officer and as an instructor of police officers and his review of the available video footage of the incident in question and the other case documents in the critical police incident report package, this officer is expected to testify as to the reasonableness of the actions at all relevant times of the police officer defendants herein, including that the officers acted reasonably at all times during their entry into the home and service of the warrant and their interaction with Jermaine Darden and that the defendant officers violated none of Plaintiffs' or Jermaine Darden's clearly established rights. The witness is expected to testify that the force used by each officer at all relevant times was reasonable and not violative of any person's clearly established rights. The witness is further expected to testify that the defendant officers acted in reasonable reliance on the information provided them by fellow officers and in reliance on the probable cause found by an independent magistrate to serve the warrant. The witness is expected to testify that the force used, including the actions that led to Plaintiff being on the ground, exposed to

a Taser , and handcuffed was reasonable and that the injury or illness suffered by Jermaine Darden was not the result of any excessive use of force or any other alleged improper action or inaction by defendants.

5. Tarrant County Medical Examiner, personnel and custodians of records, including:

Lloyd White, M.D., Ph.D., former Deputy Medical Examiner (current contact information unknown to Defendants)

Tasha Z. Greenberg, M.D., Deputy Medical Examiner

Nizam Peerwani, M.D., DABFP , Chief Medical Examiner

Robert Johnson, PH.D., DABFT, Chief Toxicologist

Kyle Finney, Medical Investigator

Michael Floyd, Chief Forensic Death Investigator

Office of Chief Medical Examiner

Tarrant County Medical Examiner's District

Tarrant County, Texas

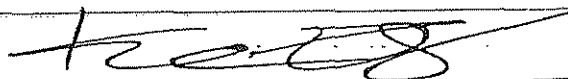
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Each of these witnesses is expected to testify consistent with the opinions contained in the autopsy report of Jermaine Darden (enclosed herewith) and based on their review of the information contained therein and known to them at the time or shortly after the autopsy was performed.

6. All of Plaintiff's past or present medical providers and custodians of records thereof. Defendants do not have access to these witnesses and do not know their opinions beyond what is in their respective records, if any. Defendants may call any of these providers in rebuttal to Plaintiff's and his experts' claims.

Respectfully submitted,



Kenneth E. East

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ATTORNEY FOR DEFENDANT
J. ROMERO

CERTIFICATE OF SERVICE

I hereby certify that on May 3, 2016, I served a copy of this document on the following parties or their counsel of record:

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DEFENDANT W.F. SNOW and J. ROMERO'S DISCLOSURE OF EXPERTS

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A handwritten signature in black ink, appearing to read 'KEE', is written over a horizontal line.

Kenneth E. East

Tasha Zemrus Greenberg, M.D., PA

May 3, 2016

Kenneth E. East
FOSTER & EAST
Attorneys at Law
9001 Airport Freeway, Suite 675
North Richland Hills, Texas 76180

Dear Mr. East,

Per your request, in the matter of ERIC C. DARDEN, as Administrator of the Estate of Jermaine Darden v. The City of Fort Worth, Texas, et al., Civil Action No. 4:15-CV-221-A, in the United States District Court, Northern District of Texas, Fort Worth Division, I have agreed to serve as an expert in this matter.

I am currently employed as a Deputy Medical Examiner at the Tarrant County Medical Examiner's Office (TCME) in Fort Worth, Texas and have worked here since September of 2012. My educational background includes receipt of a Bachelor's of Science degree in Kinesiology from the University of California at Los Angeles in 1989, receipt of a Medical Degree from Baylor College of Medicine in 1996 and completion of one year of Pathology residency at St. Joseph's Hospital and Medical Center in Phoenix, Arizona and four additional years at Baylor College of Medicine in Houston, Texas ending in 2001. I then completed a fellowship in Forensic Pathology at the Office of the Medical Examiner for the County of Cook in Chicago, Illinois in 2002 and began working as an Assistant Medical Examiner for the Office of the Chief Medical Examiner for the State of Maryland in Baltimore, Maryland until 2008. I then worked as the Medical Director for Autopsy Services at Parkland Hospital for the University of Texas Southwestern Medical Center in Dallas, Texas for three years where I supervised and taught residents in Pathology during their autopsy rotations. I am board certified in Anatomic and Forensic Pathology, and currently hold a medical license in the State of Texas. During my training and employment, I have performed approximately three thousand autopsies and observed or supervised many more.

In 2013, I was asked to review and complete the report on an autopsy that had been performed at the TCME's office on May 17, 2013. The examination had been performed by Dr. Lloyd White prior to his retirement. To this end, I reviewed all relevant and available materials, including notes, microscopic slides, investigative information, toxicology results, photographs, Taser device report and incident videos. This information was then presented at the TCME Critical Case Review on 8/21/2013 and 8/28/2013, and a consensus opinion of those medical examiners present was obtained regarding cause and manner of death. These items were re-reviewed at the present time along with provided medical records.

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-2-

The circumstances of this incident are that the decedent, Jermaine M. Darden, identified by TCME case number 1306402, with a date of birth of 7/24/1978 was involved in a physical struggle with police while a search warrant was served, during which time a Taser was deployed and he was physically restrained. The beginning of the struggle could be heard on audio of a body cam tape (GOPRO018) at approximately 1:28 time of video. A faint possible statement of "can't breathe" is heard around this time, though it is not possible to ascertain who made this statement.

The Taser was deployed at approximately 1:47 video time with a second deployment at approximately 2:02 video time, and he was seen on his back at 2:09. Review of the Taser printout verified deployment of the Taser for 5 seconds each at 16:14:51 and 16:15:07. Mr. Darden continued to struggle and was rolled over on his side, then onto his stomach and was held down while being handcuffed. During this time, movement of his head was identified. Once he was handcuffed, officers stepped away from him and then rolled him over and assisted him to a seated position out of expressed concern for his ability to breathe. He was seated unassisted briefly, then an officer is noted to stabilize him from behind. It is uncertain at what exact point he became unresponsive.

Per EMS records, first vitals were taken at 4:47:23. At this time, there was no heart rate, no respirations and no blood pressure with a glasgow coma scale of 3 and asystole by EKG. CPR was performed and he was transported to the hospital; epinephrine and narcan were noted to have been administered along with normal saline. He arrived at the emergency department at 1701. Bedside sonogram showed no cardiac activity. He was pronounced dead at 1709. Medical records did not note any past medical history on file, however there was one ER visit in June of 2012 following a motorcycle collision with no significant injuries noted. Family members report a history of asthma and hypertension, though this is not substantiated by medical records.

Autopsy findings included features of hypertensive atherosclerotic cardiovascular disease with focally severe coronary atherosclerosis including greater than 90% stenosis of the left anterior descending coronary artery and concentric left ventricular hypertrophy. The heart weighed 477 grams, which is slightly enlarged based on predicted normal weights for height. Mr. Darden was also obese with a body mass index of 52. Toxicology testing was positive for XLR-11, a synthetic cannabinoid, in the aortic blood, but was negative for ethanol and other drugs. Histologic examination of the organs showed features consistent with gross observations in the heart and lungs, with hypertrophic or enlarged cardiac myocytes, severe coronary atherosclerosis, pulmonary congestion and edema, as well as identifying hepatic steatosis or fatty change and chronic thyroiditis or inflammation in the thyroid gland. There were no features of an acute asthmatic episode identified in the lungs, which would be characterized by eosinophilic inflammation and mucus in airways.

The cause of death was ruled as sudden cardiac death associated with hypertensive atherosclerotic cardiovascular disease and application of restraint, with obesity, hepatic steatosis and chronic thyroiditis noted as contributory conditions. The manner of death was ruled as natural.

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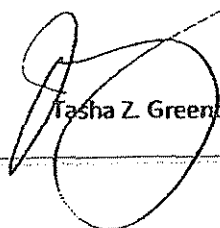
Sudden cardiac death (SCD) is a sudden, unexpected death caused by loss of heart function (sudden cardiac arrest). There are many risk factors that can increase a person's risk of sudden cardiac arrest and sudden cardiac death, including coronary artery disease, hypertension, previous myocardial infarction or heart attack, high cholesterol, family history of heart disease, smoking, obesity and recreational drug use. Activation of the sympathetic nervous system leads to accelerated heart rate, constriction of blood vessels and elevated blood pressure. Therefore, physiologic stress, such as exercise or other form of physical exertion, can trigger a life-threatening arrhythmia as well. In over half of cases, sudden cardiac arrest occurs without symptoms.

XLR-11, {1-(5-fluoropentyl)-1H-indol-3-yl} (2,2,3,3-tetramethylcyclopropyl) methanone, also known as 5-fluoro UR-144 or 5-FUR-144, is a synthetic cannabinoid, designed to mimic the agonistic effects attributed to tetrahydrocannabinol (THC) in the human system. It has been reported that the toxicity of synthetic cannabinoid, however, may be greater than THC due to higher potency, unregulated and varied dose preparation and purity on the vegetable matter and stronger activity on the cannabinoid receptors. There have been significant toxicological findings attributed to synthetic cannabinoid exposure that have not been seen with typical recreational marijuana usage, including acute nephrotoxicity, adverse psychoactive responses including severe anxiety, psychosis and hallucination, tachycardia or rapid heart rate, myocardial infarction, respiratory depression, seizures, suicidal ideations and death. The contribution of the XLR-11 synthetic cannabinoid to death in this case is uncertain.

In summary, this patient had multiple risk factors for sudden cardiac death, including severe coronary stenosis due to atherosclerosis, hypertrophy of the left side of the heart with cardiomegaly, obesity, fatty liver and thyroiditis, as well as use of a potentially cardiotoxic synthetic cannabinoid drug. The severity of his cardiac disease alone made him susceptible to sudden cardiac death at any time, with or without physical exertion. In this case, he became unresponsive associated with physical exertion during a struggle and physical restraint by the police.

Please contact me with any questions or concerns regarding this matter.

Sincerely,



Tasha Z. Greenberg, M.D.

Tasha Zemrus Greenberg, M.D.

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Current Position:

Deputy Medical Examiner Tarrant County Medical Examiner's Office (TCME), Fort Worth, TX; 2012 – Present

Committee and Other Appointments, TCME:

Faculty Supervisor for Postgraduate Education
Graduate Medical Education Committee
Safety Committee
NAME Accreditation Committee
Child Fatality Review Committee

Previous Positions:

Medical Director of Autopsy Service The University of Texas Southwestern Medical Center (Dallas, TX); 2009-2012

Assistant Professor The University of Texas Southwestern Medical Center, Department of Pathology (Dallas, TX); 2009-2012

Assistant Medical Examiner Office of the Chief Medical Examiner, State of Maryland; 2002-2008

Vice Chairman Maryland State Child Fatality Review Team; 2007-2008

Clinical Instructor University of Maryland Medical Center, Department of Pathology (Baltimore, MD); 2002-2008

Lecturer in Pathology Johns Hopkins School of Medicine, Department of Pathology (Baltimore, MD); 2007-2008

Certification:

Texas State License N3696, issued 2009

Diplomate The American Board of Pathology: Anatomic Pathology, 2002
The American Board of Pathology: Forensic Pathology, 2003

Education and Training:

Undergraduate: University of California (Los Angeles, CA); 1984-1989
B.S. (Kinesiology)

Graduate: Northwestern University, Institute for Neuroscience (Evanston, IL); 1990-1992

Medical School: Baylor College of Medicine (Houston, TX); 1992-1996
M.D.

Residency: St. Joseph's Hospital and Medical Center (Phoenix, AZ); 1996-1997
Anatomic and Clinical Pathology

 Baylor College of Medicine (Houston, TX); 1997-2000
Anatomic and Clinical Pathology

Tasha Zemrus Greenberg, M.D.

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Residency (cont.): Texas Children's Hospital (Houston, TX); 2000-2001
Pediatric Pathology

Fellowship: Office of the Medical Examiner, County of Cook (Chicago, IL); 2001-2002
Forensic Pathology

Professional Societies:

Fellow	American Academy of Forensic Sciences
Member	National Association of Medical Examiners
Member	Texas Medical Association
Member	Tarrant County Medical Society
Member	Tarrant Academy of Medicine

Educational Activities:

Classroom Instruction:

Pathology Laboratory for Medical Students, UT Southwestern (Dallas, TX); 2010-2012

Pathology Laboratory for Medical Students, Johns Hopkins Hospital (Baltimore, MD); 2007-2008.

Pathology Laboratory for Medical Students, University of Maryland (Baltimore, MD); 2003-2007

Pathology Laboratory for Medical Students, Baylor College of Medicine (Houston, TX); 1997-2001

Undergraduate Neuroanatomy Laboratory, Northwestern University (Evanston, IL); 1990-1992

Undergraduate Biology Laboratory, Northwestern University (Evanston, IL); 1990-1992

Undergraduate Gross Anatomy Laboratory, University of California (Los Angeles, CA); 1987-1988

Clinical Instruction:

Forensic Pathology Core Curriculum, Office of the Chief Medical Examiner (Baltimore, MD); 2002 – 2008

Invited Talks:

"Pediatric Death Investigations". Current Trends in Forensic Pathology: Current Trends in Forensic Science Where There's Smoke... Investigating Fire Related Deaths (Fort Worth, TX); 2015.

"Adolescent Deaths in Maryland". State Child Fatality Review Annual Training Meeting (Hanover, MD); 2007.

"Maryland Child Death Investigation: Changing trends in SIDS and SUDI". State Child Fatality Review Annual Training Meeting (Baltimore, MD); 2006.

"Child Death Investigation". Governor's Conference on Child Abuse & Neglect (Baltimore, MD); 2004.

"Child Death Investigation". Every Child Counts Conference (Baltimore, MD); 2004.

"Pediatric Death Investigation". Medicolegal Death Investigation course for Criminal Justice Majors, University of Baltimore (Baltimore, MD); 2003.

"Pediatric Death Investigation". Harvard Associates in Police Science Seminar in Homicide Investigation (Baltimore, MD); Biannually, 2003-2005.

"Sharp Force Injuries". Forensic Pathology Course, Northwestern University (Evanston, IL); 2002.

"Introduction to Forensic Pathology". Pathology Lecture Series for Medical Students, Baylor College of Medicine (Houston, TX); 2001.

Tasha Zemrus Greenberg, M.D.

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Invited Talks, (cont.):

"Forensic Medicine. Combined Program for Medical Technology Education, Baylor College of Medicine (Houston, TX); 1999 & 2000.

Research Activities:

Presentations:

Mautone A, Fries R, Greenberg T, Peerwani N If at First You Don't Succeed. American Academy of Forensic Sciences 68th Annual Meeting, February 2016. Platform Presentation (H62).

Greenberg T, Roe S, Stephen D, Peerwani N Fatal Aortoesophageal Fistulae Due to Foreign Body Ingestion in Young Children: Presentation of two cases. American Academy of Forensic Sciences 67th Annual Meeting, February 2015. Platform Presentation (H45).

Segovia A, Greenberg T, Golden K An Uncommon Cause of Pulmonary Embolism. American Academy of Forensic Sciences 67th Annual Meeting, February 2015. Platform Presentation (H144).

Greenberg T, Stephany, J, Fowler, D Two Cases of Industrial Mulch Spreader/Bark Blower Fatalities in Maryland & Florida: Description & Investigation by NIOSH Fatality Assessment & Control Evaluation (FACE). National Association of Medical Examiners Annual Meeting, October 2007, Poster Session.

Greenberg T, Zulauf D, Fowler D Compression Asphyxia of a Two Year Old by a Dresser: Autopsy, Investigation and Legal Disposition. National Association of Medical Examiners, 2007 Annual Meeting, October 2007, Poster Session.

Chu A, Allan C, Greenberg T, Ripple M, Fowler D. Fatal infant dog maulings associated with infant swings. American Academy of Forensic Sciences 57th Annual Meeting, February 2005. Poster Session.

Greenberg T, Fowler D. Fourteen pregnancy-related deaths examined at the Office of the Chief Medical Examiner, State of Maryland, in 2003. American Academy of Forensic Sciences, 56th Annual Meeting, February 2004, Poster Session.

Burke A, Mont E, Zemrus T, Pearse L, Fowler D, Virmani R. A Series of 16 Deaths in Men and Women Using Anorexigens. National Association of Medical Examiners, Annual Meeting, September, 2003, Poster Session.

Zemrus T, Segovia A. Sudden Asphyxial Death Due to Regurgitation of a Pedunculated Esophageal Lipoma: A Case Report and Review of the Literature. American Academy of Forensic Sciences, 55th Annual Meeting, February 2003, Poster Session.

Zemrus T, Shrode P. A Revised Approach to Death in Custody. American Academy of Forensic Sciences, 51st Annual Meeting, February 1999, Poster Session.

Zemrus T, Wiley K, Gondo M, Khan S, Carlson N, Cagle P. Simian Virus 40 (SV40) and p53 Detection by Immunostaining and PCR in Human Bronchioloalveolar (BACA) Carcinomas. Federation for Advancement of Science & Experimental Biology Meeting, April 1998, Poster Session.

Zemrus T, Gondo M, Wiley K, Cagle T. Immunodetection of Simian Virus 40 (SV40) in Human Pulmonary Adenocarcinoma. United States and Canadian Academy of Pathology 87th Annual Meeting, March, 1998 and Texas Society of Pathologists 77th Annual Meeting (Second Place Award), February 1998, Poster Session.

Zemrus T, Anton R, Barrios R, Habib G, Seaver S, Wiley K, Gondo M, Carlson N, King M, Cagle P. Expression of SV40 Large T Antigen (Tag) in 141 Human Malignant Mesotheliomas (MM): A Possible Etiologic Role? Federation for Advancement of Science & Experimental Biology '98 Meeting, April 1998, Platform Presentation.

Publications:

Navalkele DD¹, Georgescu MM, Burns DK, Greenberg T Vernino S Progressive leg pain and weakness. JAMA Neurol. 2013 Apr;70(4):510-4. doi: 10.1001/jamaneurol.2013.2158.

Moore K, Zemrus T, Ramcharitar V, Levine B, Fowler D. Mixed Drug Intoxication Involving Zaleplon ("Sonata"). Forensic Science International, 134: 120-122, 2003.

Dr. Greenberg – Court Appearances 2014

1305638 and 1305637 (Tarrant) – Roxann Sanchez and Anthony Figuero - Trial 5/6/2014

1301193 (Tarrant) – John Raidy - Trial 8/19/2014

1306452 (Tarrant) – Juliana Payan Trial 7/10/2014

1308725 (Midland) – Kyara West - Trial 9/17/2014

1403355 – (Tarrant) - Joselyn Saucedo - Trial 10/17/14

1309245 (Tarrant) – Alton Alexander – Trial in Palo Pinto Co. 10/9/2014

DR. GREENBERG COURT APPEARANCES 2015-PRESENT

<u>DATE</u>	<u>CASE(S)</u>	<u>COUNTY, COURT, DA, INVESTIGATOR</u>
2/6/15:	1109021	Taylor County
4/8/15:	1406582	Midland County
4/15/15:	1312096	Tarrant County
5/13/15:	1311055	Tarrant County
6/8/15:	1406276	Denton County
6/24/15:	1401510	Tarrant County
8/20/15:	1503545 1503547 1503544	Johnson County, DA Matt Smyd
8/21/15:	Same as above (sentencing phase)	
9/8/15:	1310159	Johnson County
9/23/15:	1502083	Parker County Grand Jury
11/18/15:	1407998	Taylor County, 350 th DC, DA Dan Joiner, Inv. Larry Tatum
12/8/15:	1505354	Deposition, Bryce Cottongame
12/10/15:	1416383	Tarrant County, CDC1, DA Lloyd Welchel, Judge Elizabeth Beach
2/4/16:	1415852	TCDA Carl Lazarus, Juvenile Justice Center
3/22/16:	1311286	TCDA Bill Vassar & Vincent Giardino, CDC2, Judge Roger Towery Decedent Tommy Lee Brown
4/26/16	1306650	USDA Joshua Burgess & Aisha Saleem, USDC Judge Terry Means

Tasha Zemrus Greenberg, M.D. PA


To whom it may concern:

Thank you for the opportunity to work with you on this case. My professional charges are as follows:

TYPE OF WORK	HOURLY FEE
Preparation/Meetings	\$295
Travel	\$135
Testimony	\$550
Deposition	\$650

At this time, I would request a retainer of \$2500, payable to Tasha Zemrus Greenberg, M.D. PA at the address below.

Sincerely,


Tasha Zemrus Greenberg, M.D.

Federal Tax ID No.: 46-0843278

109 Dickers Drive
Coppell, TX 75019
214-907-6543

tashagreenberg@gmail.com

EXHIBIT B



Office of Chief Medical Examiner
Tarrant County Medical Examiner's District
Tarrant County, Texas
200 Feliks Gwizdz Place, Fort Worth, Texas 76104-4919
(817) 920-5700; FAX (817) 920-5713

AUTOPSY REPORT

Name: Jermaine N. Darden
Approximate Age: 34 Years
Height: 68 Inches

CASE NO: 1306402
Sex: Male
Weight: 340 Pounds

I hereby certify that on the 17th day of May 2013, beginning at 1111 hours, I, Lloyd White, M.D., Ph.D., pursuant to Statute 49.25 of Texas Criminal Code, performed a complete autopsy on the body of Jermaine N. Darden at the Tarrant County Medical Examiner's District Morgue in Fort Worth, Texas and upon investigation of the essential facts concerning the circumstances of the death and history of the case as known to me, I am of the opinion that the findings, cause and manner of death are as follows:

FINDINGS:

I) Investigative findings:

- A. Subject engaged in physical struggle with police after failing to comply with instructions during search warrant.
- B. Taser deployed x 2 for 5-second duration each, on 5/16/2013 at 16:14:51 and 16:15:07. Device report for Model #TASER_ECD_x2, Serial #X29000FPP was reviewed.
- C. Video of incident reviewed at Critical Case Review on 8/21/2013 that showed physical struggle during which subject was tased x 2 and continued to struggle with police. He was subsequently handcuffed while in a prone position and was then placed into a seated position with his hands behind his back. At this point, he was noted to be alert and breathing on the video.
- D. At this point, it was reported to TCME investigators that the subject stated that he had asthma and was experiencing shortness of breath. He subsequently became unresponsive and resuscitative efforts were initiated.
- E. The subject arrived in the emergency department at 1701; the code started at 1707, ending at 1709 when he was pronounced dead. Narcan and Epinephrine were administered.
- F. Hospital notes indicated that the subject became unresponsive during the second Taser deployment; however, review of the videotaped incident does not support this statement.



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1306402
Jermaine N. Darden

II) Autopsy findings:

A. Hypertensive atherosclerotic cardiovascular disease:

- 1) Focally severe atherosclerosis with 90% stenosis of left anterior descending coronary artery
- 2) Concentric left ventricular hypertrophy (2.8 cm); borderline right ventricular hypertrophy
- 3) Cardiac weight 477 gms (expected 479 +/- 60 gms for weight, 316 (upper limit 446) gms for height)

B. Pulmonary congestion and edema, patchy; no acute or chronic asthmatic changes; focal early acute pneumonia; hemosiderin-laden macrophages

C. Hepatic steatosis, marked, with mild portal chronic inflammation

D. Brain with perivascular hemosiderin deposition

E. Diffuse chronic thyroiditis

F. Superficial contusion of right forehead; abrasions (2) of back

III) Toxicology: Positive for XLR-11 (synthetic cannabinoid) in aortic blood; negative for ethanol or other drugs

Page 3 of 9

7A 1306402
Jermaine N. Barden

CAUSE OF DEATH:

- I) **SUDDEN CARDIAC DEATH ASSOCIATED WITH HYPERTENSIVE ATHEROSCLEROTIC CARDIOVASCULAR DISEASE AND APPLICATION OF RESTRAINT**
- II) **OBESITY, HEPATIC STEATOSIS; CHRONIC THYROIDITIS**


MANNER OF DEATH: NATURAL

COMMENT: This case was presented at Critical Case Review on 8/21/2013 and 8/28/2013, and a consensus opinion was obtained regarding cause and manner of death. Available information regarding the incident was reviewed, along with autopsy findings and video of the incident itself. Autopsy findings are significant for an obese male with severe cardiovascular disease, chronic thyroiditis, and hepatic steatosis. There is no significant injury of the head or torso, and no injury of the anterior neck identified. Toxicology examination reveals the presence of a synthetic cannabinoid in the blood, XLR-11. Review of video of the incident reveals that there was a struggle with police when the subject was noncompliant with instructions, during which he was tased twice and held in a prone position on the ground while being handcuffed. Following this, he was placed in a seated position; at this time, he was awake; however, subsequently became unresponsive. There was no direct contribution of Taser deployment in his death. The significance of the synthetic cannabinoid is uncertain; however, as a group they are potentially cardiotoxic, particularly in the presence of significant underlying heart disease.


Signature

Tasha Z. Greenberg, M.D.
Deputy Medical Examiner

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 1306402
Jermaine N. Darden

A complete autopsy is carried out at the Tarrant County Medical Examiner's Morgue.

GROSS ANATOMIC DESCRIPTION

I. **CLOTHING AND PERSONAL EFFECTS:** The body is received in the autopsy room in a white vinyl remains removal pouch, and is dressed only in green boxer shorts. There is no jewelry.

II. **THERAPEUTIC INTERVENTION:** Evidence of medical treatment includes an oral endotracheal tube, and a left tibial needle.

III. **EXTERNAL BODY DESCRIPTION:**

The body is presumptively identified by ankle band and is that of an obese, dark brown complexioned, conventionally black man, 68 inches in stature, weighing 340 pounds, and appearing the stated age of 34 years. Rigor is complete but livor is not visible due to the dark complexion. Up to 1/8 inch in length, scalp hair is black and tightly curly (male pattern baldness is present) with a 1/8 inch in length mustache and 1/4 inch beard. Irises are brown, pupils are 4 mm in diameter and equal, and teeth are natural and in good condition. External ears and ear canals are normal; nares are patent, and the nasal septum is intact. Both earlobes are pierced. There are no fractures, amputations, or congenital malformations of upper or lower extremities. External genitalia are those of a normally developed man. There is an irregular, 1/2-inch contusion of the upper right forehead, there is a round, 3/16 inch diameter superficial abrasion of the left posterior chest just below the scapula, and there is a similar circular 3/16 inch abrasion in the midline over the lower thoracic spine. Thorough examination of the body surface, including the back, reveals no additional evidence of injury.

There is a 2 inch midsagittal linear scar over the lumbar spine, there are numerous irregular, no more than 1/4 inch scars over the anterior surfaces of both legs, there are a few similar circular scars on the anterior abdomen and medial bilateral thighs, and there is a single, round 1/4 inch scar near the center of the dorsal surface of the left hand. Around the right arm and forearm, there is a complex tattoo design, which includes birds, dollar signs, bundles of paper money, the face of a pig, and illegible lettering. Around the left arm and forearm,

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1306402
Jermaine N. Darden

there is a complex tattoo design, which includes flames, a star, "Texas Made", "OUTLAW 38", and "996, 1999".

IV. INTERNAL EXAMINATION:

BODY WALL AND SEROUS CAVITIES:

The neck, chest, and abdomen are opened by means of a standard Y-shaped incision. Viscera are examined *in situ* then removed for dissection according to the method of Virchow. Thoracic and abdominal walls are intact and normally developed, with a 2-1/2 inch anterior abdominal *panniculus adiposus*. Normally distributed subcutaneous fat tissue is moist and bright yellow. Pleural, pericardial, and peritoneal cavities are lined by smooth, blue-purple membranes without adhesions, and all contain normal quantities of transparent, pale yellow serous fluid. Soft tissues of the mediastinum, retroperitoneum, omentum, and mesenteries are grossly normal. No hemorrhage or other signs of injury are present.

NECK ORGANS

Bones and cartilages of the larynx and cervical spine are intact, as is the hyoid bone, on palpation and direct gross visualization. On dissection of the soft tissues of the neck, no hemorrhage, or other gross evidence of injury or natural disease are demonstrated.

CARDIOVASCULAR SYSTEM

The heart weighs 447 gms and the epicardium and endocardium are grossly normal. There is greater than 90% stenosis of the proximal anterior intraventricular artery, with no more than 10% stenosis of the circumflex and right coronary arteries by soft atheromatous plaque. Left and right ventricular walls are symmetrically hypertrophied, the left 2.8 cm in thickness and the right 0.5 cm. Cut surfaces of the myocardium are everywhere uniform and dark brown, without scars or other grossly discrete lesions. Valve cusps are soft and pliable, with minimal atheromatous changes and no anatomical stenosis or insufficiency. There are mild depositions of atheromatous plaque without calcification on the aortic intima, and ostia of major branches are widely patent. The great veins are normal throughout.

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1306402
Jemalene N. Darden**RESPIRATORY TRACT**

The left lung weighs 521 gms and the right 764 gms. Airways are patent, containing no foreign objects or material, and the mucosa is covered by abundant, somewhat frothy, pale gray mucus. Both lungs are firm, non-crepitant, and somewhat boggy in consistency, with smooth, shiny dark blue-purple external surfaces, and moist dark red-purple cut surfaces, which ooze frothy, thin dark gray or red-purple fluid on sectioning. Anthracosis is moderate. Wide dissection of the parenchyma reveals no cysts, masses, granulomas, or other grossly discrete lesions of natural disease.

GASTROINTESTINAL TRACT

The gastric lumen contains approximately four, no more than 1 inch in dimension, pieces of partly digested meat. The mucosa and wall of the esophagus and stomach are normal in appearance. External examination of the small bowel and colon reveals no hemorrhage, masses, or other evidence of injury or natural disease, and the vermiform appendix is grossly normal.

MAJOR DIGESTIVE ORGANS

The pancreas is soft and uniformly pale brown, dissection revealing no masses, hemorrhage, or other grossly discrete abnormalities.

The liver weighs 3289 gms, with a blue-purple capsule, and a uniform dark brown cut surface. Wide dissection reveals no cysts, masses, or other grossly discrete lesions of natural disease, and the parenchyma is normal in consistency. The gallbladder contains an estimated 10 mL of dark yellow-green bile without stones, and the extrahepatic biliary tract is patent and grossly normal.

LYMPHORETICULAR SYSTEM

The spleen weighs 179 gms, with a dark blue-purple capsule and a firm, uniformly dark red-purple cut surface without scars, infarcts, or other grossly discrete abnormalities of natural disease. There is no lymphadenopathy, and spinal bone marrow is normal in appearance. The thymus is involuted.

ENDOCRINE ORGANS

The pituitary, thyroid, parathyroids, and suprarenals are grossly normal.

URINARY TRACT

The left kidney weighs 229 gms and the right 211 gms. Capsules strip easily to reveal smooth, brown external surfaces. Cut surface architecture is normal, there being no cysts, masses, or other grossly discrete pathologic lesions. Pelves and ureters are patent and normal in appearance. The urinary bladder contains an estimated 5 mL of pale yellow, transparent urine, and the mucosa and wall are grossly normal.

REPRODUCTIVE ORGANS

Both testes are palpable in the scrotum, without masses, injury, or deformity and the prostate and seminal vesicles are grossly unremarkable for a man of this age.

CRANIUM AND CENTRAL NERVOUS SYSTEM

A craniotomy and removal of the brain are carried out through a coronal mastoid-to-mastoid incision of the scalp, reflection of which reveals a right frontal contusion, which has been previously noted. The calvarium is intact and normal in configuration. The dura is normal in appearance and the leptomeninges are transparent and grossly normal. There are no abnormalities of vessels at the base of the brain. The brain weighs 1403 gms, with a normal gyral pattern. Multiple transverse sections of brainstem and cerebellum, together with coronal sections of the cerebral hemispheres, reveal no cysts, masses, hemorrhage, or other gross evidence of injury or natural disease. On stripping of the dura, the base of the skull is intact and normal in configuration.

The spinal cord is not examined.

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1306402
Jermaine N. Darden

SPECIMENS AND EVIDENCE COLLECTED

1. 30 mL of aortic blood, 30 mL of femoral blood, 5 mL of urine, and 5 mL of vitreous humor for possible further examination
2. Representative tissue samples preserved in formalin for possible further examination
3. Two tissue cassettes for microscopic examination
4. One blood card
5. Representative photographs

EDC: 8/16/13

Dictated: 5/17/13

Transcribed: 5/20/13

Completed: 8/28/13

LW:caa

HISTOLOGY

HEART: Mildly hypertrophic myocytes, small vessel disease with medial hypertrophy, increased perivascular fibrosis. Coronary artery sections show 75-90% stenosis by atherosclerotic plaque.

LUNGS: Patchy edema, hemosiderin-laden macrophages in alveoli, congestion; no mucus plugging or eosinophilic infiltrate noted to suggest acute asthmatic changes; no significant muscular or glandular hypertrophy noted to suggest chronic asthmatic changes; small focus of acute neutrophilic infiltration in alveoli; occasional platelet thrombi.

LIVER: Diffuse, prominent centrilobular steatosis, primarily macrovesicular; minimal portal chronic inflammation with focal spillover.

THYROID: Diffuse lymphocytic infiltrate with fibrosis-forming nodules; no Hürthle cell proliferation.

BRAIN: Perivascular hemosiderin deposition.

KIDNEY: Autolysis, medullary congestion.

HILAR LYMPH NODE: Anthracosis.

Trachea, spleen, stomach, pancreas, colon, adrenal gland, skeletal muscle — no significant histopathologic change.

Office of Chief Medical Examiner

ME-18A-GPC-1953 Rev. 7/06

Tarrant, Denton and Parker Counties, Texas

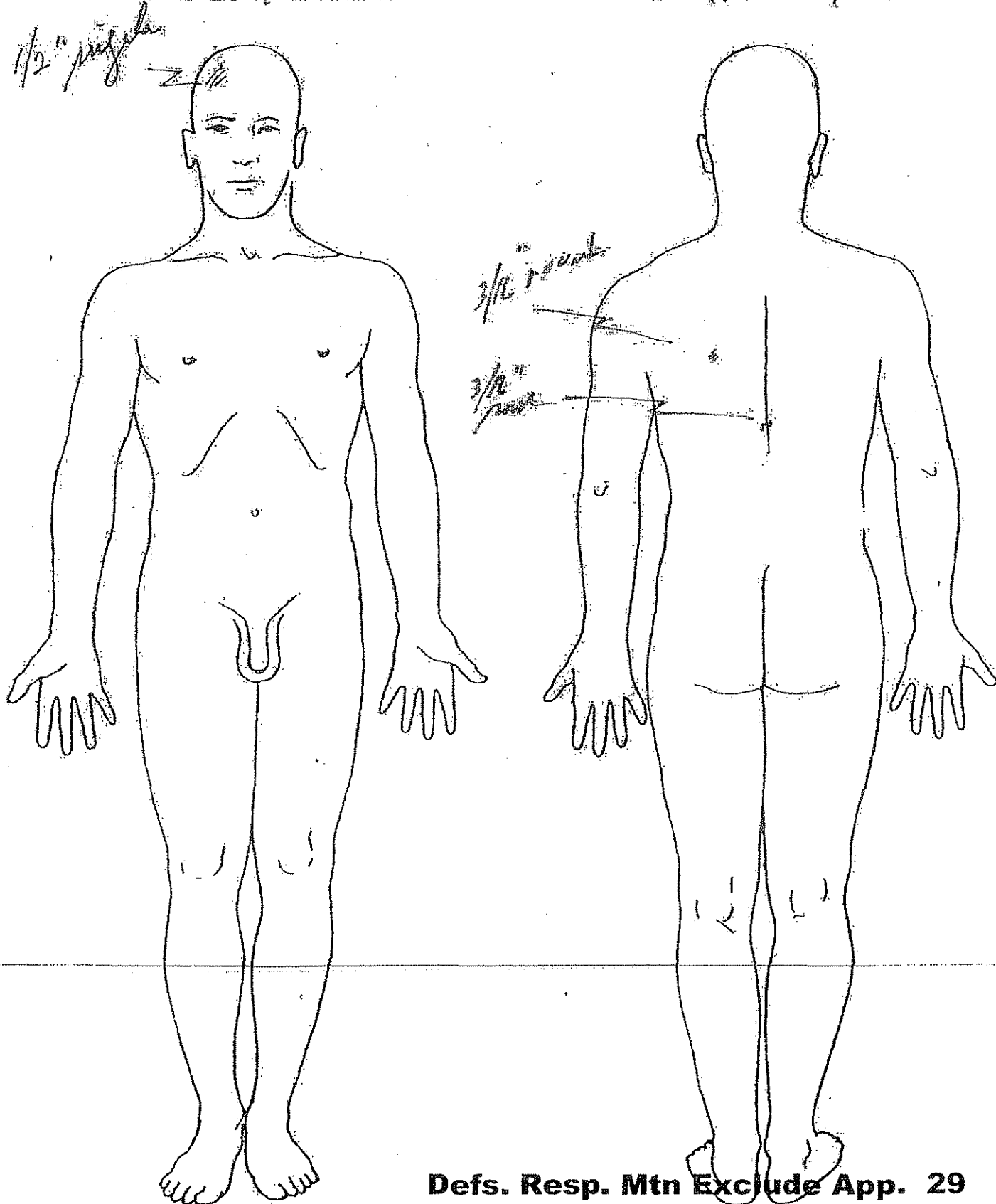
200 Felix Gwozdz Place, Fort Worth, Texas 76104-4919 ♦ (817) 920-5700

Examiner:

KLU/EC-CAA

Autopsy No.

1306402



Defs. Resp. Mtn Exclude App. 29

Toxicology Test Results

Office of Chief Medical Examiner
 Toxicology Laboratory Service
 200 Felix Gwodzi Place
 Fort Worth, Texas 76104
 Name: Jermaine N Darden
 Case Number: 1306402
 Toxicology Work Number: 1301215

Nizam Peerwani, M.D., DABFP
 Chief Medical Examiner
 Robert Johnson, Ph.D., DABFT
 Chief Toxicologist
 Priority: 0
 Service Request Number: 003

Specimen	Drug	Result	Drug Amount	Performed By
FEMORAL BLOOD	ETHANOL	NEGATIVE		I HO
URINE	AMPHETAMINE ELISA	NEGATIVE		B. LANDRY
URINE	METHAMPHETAMINE ELISA	NEGATIVE		B. LANDRY
URINE	THC ELISA	NEGATIVE		B. LANDRY
URINE	OPIATES ELISA	NEGATIVE		B. LANDRY
URINE	COCAINE ELISA	NEGATIVE		B. LANDRY
URINE	BENZODIAZEPINES ELISA	NEGATIVE		B. LANDRY
URINE	OXYCODONE ELISA	NEGATIVE		B. LANDRY
URINE	ACID	NEGATIVE		T. FLOWERS
URINE	BASE	NEGATIVE		T. FLOWERS

Report Prepared By: B. Landry

Approved By: Robert Johnson

Approved Date: 6/15/13



NMS Labs

CONFIDENTIAL

3701 Welsh Road, PO Box 433A, Willow Grove, PA 19090-0437
 Phone: (215) 657-4900 Fax: (215) 657-2972
 e-mail: nms@nmslabs.com

Robert A. Middleberg, PhD, DABFT, DABCC-TC Laboratory Director

Toxicology Report

Report Issued 06/15/2013 19:00

To: 10147

Tarrant County Medical Examiner
 Office of the Medical Examiner
 200 Felix Gwozdz Place
 Fort Worth, TX 761044919

Patient Name DARDEN, JERMAINE N.

Patient ID ME# 1306402

Chain 11443345

Age 34 Y

Gender Male

Workorder 13339386

Page 1 of 3

Positive Findings:

Compound	Result	Units	Matrix Source
XLR-11	Positive	ng/mL	Aortic Blood

See Detailed Findings section for additional information

Testing Requested:

Analysis Code	Description
9560B	Synthetic Cannabinoids Screen, Blood (Forensic)

Specimens Received:

ID	Tube/Container	Volume/ Mass	Collection Date/Time	Matrix Source	Miscellaneous Information
001	Red Vial	3.25 mL	05/17/2013 11:11	Aortic Blood	

All sample volumes/weights are approximations.

Specimens received on 05/31/2013

v.8

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Workorder 1313932
 Chain 11443345
 Patient ID ME# 1306402

Page 2 of 3

Detailed Findings:

Analysis and Comments	Result	Units	Rpt. Limit	Specimen Source	Analysis By
XLR-11	Positive	ng/mL	0.10	001 - Aortic Blood	LC-MS/MS

Other than the above findings, examination of the specimen(s) submitted did not reveal any positive findings of toxicological significance by procedures outlined in the accompanying Analysis Summary.

Reference Comments:

j. XLR-11 (K2, Space, Spice, Spike, Synthetic Cannabinoids, Yucatan Fire) - Aortic Blood

XLR-11, a synthetic cannabinoid, has been identified in products sold as "herbal incense". These products are sold under a wide variety of names including (but not limited to) Spice, Yucatan Fire, Smoke, Sence, K2, Skunk, Space, K2 Citron, and K2 Blonde. These products may be used as an alternative to cannabis.

No information is available on the metabolism of XLR-11 or expected blood, serum or plasma concentrations following use.

Testing for this analyte was qualitative only. Quantitative analysis is available upon request; please contact the laboratory for more information.

Chain of custody documentation has been maintained for the analyses performed by NMS Labs.

Unless alternate arrangements are made by you, the remainder of the submitted specimens will be discarded six (6) weeks from the date of this report, and generated data will be discarded five (5) years from the date the analyses were performed.

Analysis Summary and Reporting Limits:

Acodé 5960B - Synthetic Cannabinoids Confirmation, Blood (Forensic) - Aortic Blood

-Analysis by High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) for:

Compound	Rpt. Limit	Compound	Rpt. Limit
A-796260	0.10 ng/mL	JWH-061	0.10 ng/mL
AM-1248	0.10 ng/mL	JWH-122	0.10 ng/mL
AM-2201	0.10 ng/mL	JWH-200	0.10 ng/mL
AM-2233	0.10 ng/mL	JWH-203	0.10 ng/mL
AM-694	0.10 ng/mL	JWH-210	0.10 ng/mL
JWH-018	0.10 ng/mL	JWH-250	0.10 ng/mL
JWH-018 5-chloropentyl	0.10 ng/mL	RCS-4	0.10 ng/mL
JWH-019	0.10 ng/mL	RCS-8	0.10 ng/mL
JWH-022	0.10 ng/mL	UR-144	0.20 ng/mL
JWH-073	0.10 ng/mL	XLR-11	0.10 ng/mL

Acodé 9560B - Synthetic Cannabinoids Screen, Blood (Forensic) - Aortic Blood

-Analysis by High Performance Liquid Chromatography/Tandem Mass Spectrometry (LC-MS/MS) for:

Compound	Rpt. Limit	Compound	Rpt. Limit
A-796260	0.20 ng/mL	JWH-019	0.10 ng/mL
AM-1248	0.20 ng/mL	JWH-022	0.10 ng/mL
AM-2201	0.10 ng/mL	JWH-073	0.10 ng/mL
AM-2233	0.20 ng/mL	JWH-081	0.10 ng/mL
AM-694	0.10 ng/mL	JWH-122	0.20 ng/mL
JWH-018	0.10 ng/mL	JWH-200	0.20 ng/mL
JWH-018 5-chloropentyl	0.10 ng/mL	JWH-203	0.20 ng/mL

v.8



CONFIDENTIAL

Workorder 13139300
 Chain 11443345
 Patient ID: ME# 1306402

Page 3 of 3

Analysis Summary and Reporting Limits:

<u>Compound</u>	<u>Rpt. Limit</u>	<u>Compound</u>	<u>Rpt. Limit</u>
JWH-210	0.10 ng/mL	RCS-8	0.10 ng/mL
JWH-250	0.10 ng/mL	DR-144	0.10 ng/mL
RCS-4	0.10 ng/mL	XLR-11	0.20 ng/mL

v.8

**TARRANT COUNTY MEDICAL EXAMINER'S DISTRICT
SERVING TARRANT, PARKER, & DENTON COUNTIES
Investigator's Report**

CASE #: 1306302 Tarrant TYPE: Jurisdiction IDENTITY: Identified

NEZAM PEERWANI, M.D. MICHAEL FLOYD
CHIEF MEDICAL EXAMINER CHIEF FORENSIC DEATH INVESTIGATOR

DECEASED: Jermaine N Darden

ADDRESS: 3232 Thammisch Ave, Fort Worth, Texas 76105

AGE: 34 BIRTH DATE: MARITAL STATUS: Married

PHONE: RACE OR COLOR: Black SEX: M

HEIGHT: WEIGHT:

SSN: MANNER OF DRESS: Boxers

OCCUPATION:

PLACE OF EMPLOYMENT:

DATE OF DEATH: 5/16/2013 TIME OF DEATH: 17:06

PLACE OF DEATH DESCRIPTION: Hospital ER

ADDRESS OF DEATH: 1575 South Main Street, Fort Worth, Texas 76104

HOSPITALIZED: Yes

ADMIT DATE: 5/16/2013 ADMIT TIME: 17:06

ENVIRONMENT CONDITION: indoors

CHARACTERISTIC OF PREMISES: Private residence

DATE/TIME M.E. NOTIFIED: 5/16/2013 17:22

ARRIVED:

REPORTING PERSON: Janet Rogers, RN

REPORTING AGENCY: John Peter Smith Hospital

ADDRESS: 1575 South Main Street, Fort Worth, Texas 76104

PHONE: (817) 702-3417

PRONOUNCED DEAD BY: Dr. Janet Rogers

PRONOUNCING AGENCY: John Peter Smith Hospital

LAST TREATED BY:

DATE/TIME OF OCCURRENCE: 5/16/2013 16:30

INJURY AT WORK: NO

PLACE OF OCCURRENCE: Private residence

LOCATION: 3232 Thammisch Ave., Fort Worth, Texas 76105

TRAUMA RELATED: Yes

IDENTIFIED BY: Kyle Finney

IDENTIFICATION TYPE: Visual

DATE/TIME OF IDENTIFICATION: 5/16/2013 - Time: 21:45

IDENTIFICATION STATUS: Positive ID

COMMENTS:

ADDRESS:

PHONE:

NEXT OF KIN NOTIFICATION DATE/TIME: 5/16/2013 21:45

NOTIFIED BY: ED Kyle Finney

NOTIFYING AGENCY: TCMF

NEXT OF KIN NAME: Darnicka Goodacre

RELATIONSHIP: wife

COMMENTS:

ADDRESS: Fort Worth, 76105 Texas

PHONE: (682) 365-7263

BODY TO:

CONVEYANCE: Accurate

FUNERAL HOME:

5/17/2013

Page 1

5/17/2013

Page 2

Defs. Resp. Mtn Exclude App. 34

**TARRANT COUNTY MEDICAL EXAMINER'S DISTRICT
SERVING TARRANT, PARKER, & DENTON COUNTIES**

INVESTIGATOR'S REPORT

NIZAM BEERWANI, M.D.
CHIEF MEDICAL EXAMINER

MICHAEL FLOYD
CHIEF FORENSIC DEATH INVESTIGATOR

Case Number: 1306402

Case Type: Jurisdiction

DECEDENT'S NAME: Jeannine M Darden

AGE: 34

ADDRESS: 3232 Thannisch Ave, Fort Worth, Texas 76105

BIRTH DATE: 8/8

MARITAL STATUS: Married

PHONE:

CASE NO. 1306402 Tarrant

The decedent is a 34-year-old black male who became unresponsive after being tasered twice by the Fort Worth Police Department. Fort Worth Police Detective Roloff advises that their agency deployed an X2 taser twice on the decedent when he became physically non-compliant to their instructions while serving a narcotics search warrant.

Total # of photos: 0

DESCRIPTION OF BODY:

The body was viewed at the TCME. The decedent presents as a black male, clad in boxer shorts and is cool to the touch. Rigor mortis is developing. Lividity could not be observed and there was evidence of invasive medical intervention. There were two small defects observed on the middle of the decedent's back.

MEDICAL HISTORY:

The decedent's brother advises that the decedent has a history of hypertension. Detective Roloff advises the decedent stated that he had asthma after being tasered the second time and that he was experiencing labored breathing. Melissa of the John Peter Smith Hospital states that there was no admit fluid drawn upon admission and that Epinephrine and Narcan was administered to the decedent while CPR was being administered. Medical records from John Peter Smith Hospital were sent with the decedent and included with the case file.

DETAILS OF INCIDENT:

Mick Hayden, RN of the John Peter Smith Hospital reported that on 5/16/2013 at approximately 1706 hours the decedent was admitted to their emergency room with CPR in progress after allegedly being tasered by the Fort Worth Police Department while serving a narcotics warrant and that the decedent was pronounced at 1709 hours.

Detective Roloff of the Fort Worth Police Department advises that on 5/16/2013 at approximately 1600 hours their department executed a narcotics search warrant at a residence. The decedent was ordered to the ground inside the residence by officers, to which he initially complied. Roloff advises that an officer who weighs approximately 140 lbs. attempted to handcuff the decedent, the decedent became physically non-compliant and stood up with the officer on the decedent's back. Roloff says that a second officer attempted to assist but the decedent continued to walk towards an adjacent room, while struggling with the officers. Roloff states that an officer deployed a Taser Model X2 on the decedent for a five second cycle. The decedent initially began to comply with the officers instructions but stood up again and continued to walk into an adjacent room. A second five second cycle was deployed and the decedent went to the ground and was handcuffed. Roloff states that the

Case No. 1306402 Tarrant County Medical Examiner's Office

decedent was still conscious and complained that he had asthma and began to have labored breathing and the decedent then became unresponsive. EMS services were called to the scene and transported the decedent to John Peter Smith Hospital where he was pronounced.

This investigator spoke with the decedent's mother, Donna Randle, who advises that she was on scene at the residence and positively identified the decedent.

This investigator spoke with the decedent's mother and advised her of TCME protocols.

Instrument Causing Injury:

Taser

Model

X2

ORGAN TISSUE DONOR:

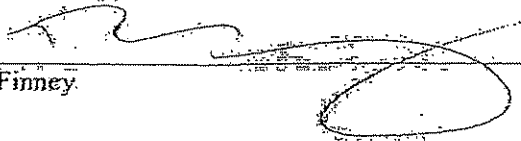
There is no signed consent form to allow harvesting of organs or tissue.

FOLLOW UP INVESTIGATIONS REQUIRED

No follow-up investigation is needed at this time.

COMMENTS:

There was no property to be removed from the decedent.



Kyle P. Finney

**TARRANT COUNTY MEDICAL EXAMINER'S DISTRICT
SERVING TARRANT, PARKER, & DENTON COUNTIES**
Investigator's Report

CASE #: 1306402

Tarrant

TYPE: Jurisdiction.

IDENTITY: Identified.

NIZAM PHERWAN, M.D.

MICHAEL FLOYD

CHIEF MEDICAL EXAMINER

CHIEF FORENSIC DEATH INVESTIGATOR

NAME OF RELEASING AUTHORITY:

RELATIONSHIP:

DISPOSITION OF PROPERTY:

MEDICAL INVESTIGATOR:

Kyle Finney

5/17/2013

Page 2

C

EXHIBIT C

Tasha Greenberg
July 11, 2016

1

Page 1

IN THE UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF TEXAS
FORT WORTH DIVISION

ERIC DARDEN, as administrator)
Of the Estate of Jermaine)
Darden)

V.) CIVIL ACTION
) NO. 4:15-CV-221-A

THE CITY OF FORT WORTH,)
TEXAS, et al.)

ORAL AND VIDEOTAPED DEPOSITION

TASHA GREENBERG, M.D.

JULY 11, 2016

ORAL AND VIDEOTAPED DEPOSITION OF TASHA

GREENBERG, M.D., a witness produced at the instance of
the Plaintiff, was taken in the above-styled and
numbered cause on the 11th day of July 2016, from
4:15 p.m. to 7:38 p.m., before Dawn Baldwin, CSR in and
for the State of Texas, reported by machine shorthand,
at the City of Fort Worth, Office of the City Attorney,
1000 Throckmorton Street, Fort Worth, Texas.

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Def's Resp. Mtn Exclude App. 39



Tasha Greenberg
July 11, 2016

6 to 9

<p style="text-align: right;">Page 6</p> <p>1 Q. What is your middle name?</p> <p>2 A. It's Zenrus, Z as in zebra, E, M as in Mary,</p> <p>3 R-U-S, as in Sam.</p> <p>4 Q. What is your -- I'm sorry, what is your date of</p> <p>5 birth, Dr. Greenberg?</p> <p>6 A. 3-27-66.</p> <p>7 Q. And what's your current address?</p> <p>8 A. Work or home?</p> <p>9 Q. Work on this one.</p> <p>10 [REDACTED] Feliks Gwozdz Place in Fort Worth.</p> <p>11 Q. Zip code?</p> <p>12 A. 76104.</p> <p>13 Q. And what's your home address?</p> <p>14 A. [REDACTED]</p> <p>15 [REDACTED]</p> <p>16 Q. And how are you currently employed?</p> <p>17 A. I'm a deputy medical examiner at the Tarrant</p> <p>18 County Medical Examiner's Office in Fort Worth.</p> <p>19 Q. Do you teach any courses at any universities?</p> <p>20 A. Not at this time, no.</p> <p>21 Q. Have you ever?</p> <p>22 A. Sorry, I'm trying -- yes, I -- yes, in the past.</p> <p>23 It's been a while, though.</p> <p>24 Q. Which school?</p> <p>25 A. The University of Maryland.</p>	<p style="text-align: right;">Page 8</p> <p>1 and for short, I'm going to refer to it as a synthetic</p> <p>2 drug. Is that fair?</p> <p>3 A. Yes.</p> <p>4 Q. How often do you read any publications on the</p> <p>5 synthetic drug?</p> <p>6 A. Only as necessary.</p> <p>7 Q. And how familiar would you consider yourself to</p> <p>8 be with that particular drug?</p> <p>9 MR. EAST: Objection; vague.</p> <p>10 A. Again, I have recently been reading articles</p> <p>11 about the drug and so as familiar as I can be with those</p> <p>12 publications.</p> <p>13 Q. Did you start reading these publications as a</p> <p>14 result of you having to give testimony in this trial?</p> <p>15 A. No. I had looked into it previously when this</p> <p>16 case was originally examined, which would have been back</p> <p>17 in 2013.</p> <p>18 Q. Prior to the case being examined, you did not</p> <p>19 have any experience with this synthetic drug?</p> <p>20 A. Not this particular synthetic cannabinoid, no.</p> <p>21 Q. So based on your experience at the time that this</p> <p>22 incident occurred, you wouldn't have had the experience</p> <p>23 and training to be able to make a determination whether</p> <p>24 or not that drug was a contributing factor to</p> <p>25 Mr. Darden's death?</p>
<p style="text-align: right;">Page 7</p> <p>1 Q. And what courses did you lecture at the</p> <p>2 University of Maryland?</p> <p>3 A. That was a course for medical students in death</p> <p>4 certification. And I also gave lectures when I was</p> <p>5 working at UT Southwestern in Dallas.</p> <p>6 Q. What year were you working at UT Southwestern?</p> <p>7 A. That was in 2009 through 2012.</p> <p>8 Q. I'm going to try to make this as short as</p> <p>9 possible, but have you ever taught any courses on</p> <p>10 XLR-11, and to be short, the synthetic cannabinoid?</p> <p>11 A. Cannabinoid.</p> <p>12 Q. Cannabinoid. All right. Have you ever taught</p> <p>13 any courses?</p> <p>14 A. No.</p> <p>15 Q. Have you ever taken any type of training on that?</p> <p>16 A. No.</p> <p>17 Q. Have you received any type of certification?</p> <p>18 A. I don't believe there is any, but no.</p> <p>19 Q. And how familiar are you with it?</p> <p>20 MR. EAST: Objection; vague.</p> <p>21 A. I'm as familiar with it as I am with other drugs</p> <p>22 that we routinely test for as far as reading books and</p> <p>23 other publications and consulting with our forensic</p> <p>24 toxicologist.</p> <p>25 Q. How often do you read books and publications --</p>	<p style="text-align: right;">Page 9</p> <p>1 A. As far as I know, there is no specific training</p> <p>2 in that area. My ability to make a ruling on that is</p> <p>3 based on what information was out there at the time. I</p> <p>4 believe there's been a few additional publications since</p> <p>5 then that I was able to look at recently. So using what</p> <p>6 was available at the time is where I had given my</p> <p>7 original statement that the role of this drug or its</p> <p>8 effects was a bit uncertain.</p> <p>9 Q. So sitting here today, you're not going to give</p> <p>10 testimony or you will not be giving any type of</p> <p>11 testimony indicating that this drug perhaps was a cause</p> <p>12 of Mr. Darden's death based on the information that you</p> <p>13 had at the time of the autopsy?</p> <p>14 A. The information that I indicated in my original</p> <p>15 report was that there are certain effects of the</p> <p>16 synthetic cannabinoids that can potentially play a role</p> <p>17 in death and gave the statement that it was uncertain if</p> <p>18 there was a role, and that is basically, even with</p> <p>19 additional information, the same basic statement.</p> <p>20 Q. So your opinion would be that it's uncertain?</p> <p>21 A. Yes.</p> <p>22 Q. Have you ever had any license suspended or</p> <p>23 revoked?</p> <p>24 A. No, sir.</p> <p>25 Q. Have you ever been disciplined by any</p>

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Tasha Greenberg
July 11, 2016

10 to 13

<p style="text-align: right;">Page 10</p> <p>1 professional association or society?</p> <p>2 A. No.</p> <p>3 Q. Is it your understanding that you have been</p> <p>4 retained by one or more of the parties to provide to the</p> <p>5 Court or the jury what is called expert testimony?</p> <p>6 A. Yes.</p> <p>7 Q. And who have you been retained by?</p> <p>8 A. I was consulted by Mr. East.</p> <p>9 Q. And do you know who you was retained by?</p> <p>10 A. I'm not exactly sure what that would be. I'm not</p> <p>11 sure if it's him or if it's the City, to be honest.</p> <p>12 Q. And what is your understanding of your role in</p> <p>13 this case as far as providing expert testimony?</p> <p>14 A. My understanding was explanation of the autopsy</p> <p>15 results and the logic for the conclusions drawn.</p> <p>16 Q. And have you had the opportunity to see</p> <p>17 Dr. Briskin's expert report?</p> <p>18 A. Dr. Briskin, yes.</p> <p>19 Q. Yes. Is there anything in Dr. Briskin's expert</p> <p>20 report that you disagree with?</p> <p>21 A. Yes.</p> <p>22 Q. Dr. Briskin indicated that he disagreed that the</p> <p>23 cause of Mr. Darden's death was natural?</p> <p>24 A. That would be the manner.</p> <p>25 Q. Is it your testimony to the jury that Mr. Darden</p>	<p style="text-align: right;">Page 12</p> <p>1 A. The meaning is that the underlying natural</p> <p>2 conditions are considered the most significant factors</p> <p>3 in this death.</p> <p>4 MR. WASHINGTON: Can we go off the record</p> <p>5 for a second?</p> <p>6 THE VIDEOGRAPHER: Now off record at</p> <p>7 4:25 p.m.</p> <p>8 (Break taken from 4:25 to 4:27.)</p> <p>9 THE VIDEOGRAPHER: Now on record at</p> <p>10 4:27 p.m.</p> <p>11 MR. WASHINGTON: Can you read the last</p> <p>12 question? I'm sorry.</p> <p>13 (Requested portion read back.)</p> <p>14 Q. (By Mr. Washington) Now, Dr. Greenberg, are you</p> <p>15 aware that in the context of the expert who's giving</p> <p>16 testimony whether or not the jury is entitled to know</p> <p>17 whether or not you have any type of bias or potential</p> <p>18 bias in testifying on behalf of the Defendants?</p> <p>19 A. Sure.</p> <p>20 Q. And do you have any potential biases?</p> <p>21 A. I do not.</p> <p>22 Q. You understand that your -- the autopsy and</p> <p>23 opinion that was given by the Tarrant County Medical</p> <p>24 Examiner's Office is being challenged?</p> <p>25 A. Well, I do now, yes.</p>
<p style="text-align: right;">Page 11</p> <p>1 would have died on that day regardless of the struggles</p> <p>2 that took place?</p> <p>3 A. I can't say for certain that he would have died</p> <p>4 on that day. All I can say for certain is that he did</p> <p>5 have significant underlying natural disease processes</p> <p>6 that put him at risk for a sudden death pretty much at</p> <p>7 any time.</p> <p>8 MR. WASHINGTON: Objection; nonresponsive.</p> <p>9 Q. Can you explain to the jury what do you mean by</p> <p>10 Mr. Darden's death -- the manner of his death was</p> <p>11 natural?</p> <p>12 A. So the manner of death is a classification of --</p> <p>13 a classification of death that is used in -- to fill out</p> <p>14 a death certificate, and there are different categories</p> <p>15 of that. In this particular case, the case was reviewed</p> <p>16 in our office at our critical case review meeting on two</p> <p>17 occasions by multiple people in our office, and the</p> <p>18 consensus was to rule this case a natural death.</p> <p>19 MR. WASHINGTON: Objection; nonresponsive.</p> <p>20 Q. My question is I want you to explain to the jury</p> <p>21 what is the meaning of a death -- the manner of the</p> <p>22 death being natural.</p> <p>23 A. That means --</p> <p>24 MR. EAST: Objection; vague, asked and</p> <p>25 answered. But you can answer.</p>	<p style="text-align: right;">Page 13</p> <p>1 Q. And you understand -- you do understand that if</p> <p>2 you have any type of potential biases, that it would be</p> <p>3 proper for you to reveal those?</p> <p>4 MR. EAST: Objection; argumentative, asked</p> <p>5 and answered.</p> <p>6 A. Yes.</p> <p>7 Q. Dr. Greenberg, have you ever given your</p> <p>8 deposition before?</p> <p>9 A. Yes.</p> <p>10 Q. Okay. And how many times have you given your</p> <p>11 deposition?</p> <p>12 A. Not very many. Two, maybe three times.</p> <p>13 Q. Have you ever had to testify on behalf of the</p> <p>14 City of Fort Worth?</p> <p>15 A. No.</p> <p>16 Q. Have you ever worked with Ken East before?</p> <p>17 A. No.</p> <p>18 Q. Have you ever worked with Lee Thomas before?</p> <p>19 A. No.</p> <p>20 Q. Do you -- are you -- strike that question. Do</p> <p>21 you know whether or not the Tarrant County Medical</p> <p>22 Examiner has ever been challenged by an expert by the</p> <p>23 name of Crow -- last name of Crow regarding the causes</p> <p>24 of death?</p> <p>25 A. I do not.</p>

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Tasha Greenberg
July 11, 2016

46 to 49

<p style="text-align: right;">Page 46</p> <p>1 A. Is there something specific that you're referring 2 to as far as opinions? 3 Q. No. I want to know the opinions that you reach. 4 You understand that you were retained as an expert to 5 give opinions in this case, correct? 6 A. Yes. 7 Q. And I'm asking you to tell the jury the opinions 8 that you reached. 9 A. The conclusions that were made regarding this 10 case were that -- that we determined a cause of death 11 that was ruled a sudden cardiac death associated with 12 hypertensive atherosclerotic cardiovascular disease and 13 application of restraint with obesity, hepatic steatosis 14 and chronic thyroiditis as contributory conditions. 15 Q. So, in your opinion, you took into consideration 16 that there was an application of restraint, correct? 17 A. Yes. 18 Q. Despite that, you indicated that the manner of 19 death was ruled as natural? 20 A. That was the consensus opinion, yes. 21 Q. I'm asking about your opinion. You're the expert 22 testifying in this case. You indicated that there 23 was -- there was an application of restraint -- 24 A. Yes. 25 Q. -- correct? And you do agree that the</p>	<p style="text-align: right;">Page 48</p> <p>1 MR. WASHINGTON: Objection; nonresponsive. 2 Q. If one of the officers would have died in this 3 struggle, would you have considered their death to be 4 natural? 5 MR. EAST: Objection; calls for speculation. 6 MS. BROWN: Objection; calls for 7 speculation. 8 MR. EAST: Incomplete hypothetical. 9 A. I can't answer that without more specifics. 10 Q. Now, wouldn't you agree that the interjection of 11 a struggle changes the manner of death to an accident? 12 A. I think that the determination of the manner is 13 open to interpretation. Whether it could be considered 14 an accident or could be considered undetermined all are 15 dependent upon who's reviewing it and -- 16 Q. Okay. Again, my question to you is, the 17 interjection of struggle could change the manner of 18 death to accident? 19 MR. EAST: Objection; asked and answered. 20 A. It -- a different manner of death certainly could 21 be considered as an opinion by a different expert or 22 office. 23 Q. And, Doc, there is nothing that you have that 24 would have indicated that he would have died that day 25 without police intervention or the struggle that he was</p>
<p style="text-align: right;">Page 47</p> <p>1 application of restraint can cause some type of injury 2 and/or death? 3 MR. EAST: Objection. 4 A. Depending on the type of restraint, yes. 5 Q. You did not describe the type of restraints in 6 here, did you? 7 A. I believe I did. 8 Q. Why don't you point out the type of restraints? 9 MR. EAST: Objection; best evidence. 10 A. There's taser deployment and physical restraint. 11 There's held down while being handcuffed. 12 Q. And wasn't the struggle with police listed as a 13 factor in the cause of death? 14 A. It was listed, yes, it was. 15 Q. In fact, can you point that out in the autopsy 16 report? 17 A. In the autopsy report? 18 Q. Yes, where they listed struggle with the police 19 as a factor in the cause of death. 20 A. It is listed as application of restraint in the 21 cause of death. 22 Q. So how can you have that as a factor, yet list 23 the manner of death as natural? 24 A. The underlying natural conditions were considered 25 the most significant factor in this case.</p>	<p style="text-align: right;">Page 49</p> <p>1 involved in? 2 A. He did have significant underlying natural 3 disease, including a significant blockage of one of his 4 major coronary arteries that is known to be a reason for 5 sudden death, in particular with his enlarged heart and 6 the obesity as an additional risk factor. That 7 certainly can lead to a sudden cardiac death even in the 8 absence of a struggle. 9 MR. WASHINGTON: Objection; nonresponsive. 10 Q. Dr. Greenberg, would the witness call it -- would 11 you call the manner of death an accident or a homicide 12 if somebody was struggling with an individual to take 13 their wallet? 14 MR. EAST: Objection; calls for speculation, 15 incomplete hypothetical. 16 A. It would depend on the other findings involved in 17 the case. 18 Q. Or if one of the officers had cardiac disease and 19 he died during the struggle with Mr. Larden, would you 20 classify that officer's death as natural? 21 MR. EAST: Same objections. 22 MS. BROWN: Objection; speculation. 23 A. Again, it would certainly depend on all of the 24 circumstances as well as the examination findings, so I 25 can't say for certain what a ruling would be.</p>

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July 11, 2016

122 to 125

<p style="text-align: right;">Page 122</p> <p>1 testify on or not.</p> <p>2 Q. Well, this is -- this is your opinion, correct?</p> <p>3 MR. THOMAS: Asked and answered.</p> <p>4 MS. BROWN: Same objection.</p> <p>5 A. This was the explanation for the opinion.</p> <p>6 Q. And there is nothing that you disagree with other</p> <p>7 than the placements of the darts in Mr. Darden's back --</p> <p>8 strike that. There is nothing that you disagree with in</p> <p>9 Dr. Briskin's report other than the placement of the</p> <p>10 darts in his back, correct?</p> <p>11 MR. EAST: Objection; asked and answered.</p> <p>12 MR. THOMAS: Objection.</p> <p>13 A. I would disagree as far as whether or not the</p> <p>14 restraint activities are the reason for his sudden</p> <p>15 cardiac arrest.</p> <p>16 Q. But you would agree that different doctors come</p> <p>17 up with different opinions, correct?</p> <p>18 A. Absolutely.</p> <p>19 Q. It doesn't make yours right and it doesn't make</p> <p>20 his right?</p> <p>21 MS. BROWN: Objection; argumentative.</p> <p>22 Q. Correct?</p> <p>23 MR. THOMAS: Calls for speculation.</p> <p>24 A. They are different opinions.</p> <p>25 Q. And there's nothing, based on your medical</p>	<p style="text-align: right;">Page 124</p> <p>1 IN THE UNITED STATES DISTRICT COURT</p> <p>2 NORTHERN DISTRICT OF TEXAS</p> <p>3 PORT WORTH DIVISION</p> <p>4 ERIC DARDEN, as administrator)</p> <p>5 Of the Estate of Jermaine)</p> <p>6 Darden)</p> <p>7)</p> <p>8 V.) CIVIL ACTION</p> <p>9) NO. 4:15-CV-221-A</p> <p>10)</p> <p>11 THE CITY OF FORT WORTH,)</p> <p>12 TEXAS, et al.)</p> <p>13 *****</p> <p>14 REPORTER'S CERTIFICATION</p> <p>15</p> <p>16 I, Dawn Baldwin, a Certified Shorthand Reporter</p> <p>17 duly commissioned and qualified in and for the State of</p> <p>18 Texas, do hereby certify that there came before me on</p> <p>19 the 11th day of July, 2016, at the City of Fort Worth,</p> <p>20 Office of the City Attorney, 1000 Throckmorton Street,</p> <p>21 Fort Worth, Texas 76102, the following named person,</p> <p>22 to-wit: TASHA GREENBERG, M.D., who was duly sworn to</p> <p>23 testify the truth, the whole truth, and nothing but the</p> <p>24 truth of knowledge touching and concerning the matters</p> <p>25 in controversy in this cause; and that he was thereupon</p> <p>examined upon oath and his examination reduced to</p> <p>typewriting under my supervision; that the deposition is</p> <p>a true record of the testimony given by the witness.</p> <p>I further certify that pursuant to FRCP Rule</p>
<p style="text-align: right;">Page 123</p> <p>1 expertise, that Dr. Briskin is saying in his report that</p> <p>2 does not make sense?</p> <p>3 MR. THOMAS: Asked and answered.</p> <p>4 A. Again, as I said before, the issue about the</p> <p>5 darts and the spinal cord injury, to me, does not make</p> <p>6 sense. And again, in the view of the video that we have</p> <p>7 reviewed, I still take issue with what I'm seeing here</p> <p>8 as far as him being seated.</p> <p>9 Q. But you would agree that Dr. Briskin is not</p> <p>10 indicating in his report that the taser is the sole</p> <p>11 cause of Mr. Darden's death?</p> <p>12 MS. BROWN: Objection; asked and answered.</p> <p>13 A. Yes.</p> <p>14 MR. WASHINGTON: Pass the witness.</p> <p>15 MS. BROWN: No questions.</p> <p>16 MR. EAST: Reserve mine.</p> <p>17 MR. THOMAS: Reserve.</p> <p>18 THE VIDEOGRAPHER: We're now off record at</p> <p>19 7:38 p.m.</p> <p>20 (END OF PROCEEDINGS)</p> <p>21</p> <p>22</p> <p>23</p> <p>24</p> <p>25</p>	<p style="text-align: right;">Page 125</p> <p>1 30(e)(1) that the signature of the deponent:</p> <p>2 ___ was requested by the deponent or a party</p> <p>3 before the completion of the deposition;</p> <p>4 ___ was not requested by the deponent or a party</p> <p>5 before the completion of the deposition.</p> <p>6 I further certify that I am neither attorney or</p> <p>7 counsel for, nor related to or employed by any of the</p> <p>8 parties or attorneys in the action in which this</p> <p>9 proceeding was taken, and further that I am not a</p> <p>10 relative or employee of any attorney or counsel employed</p> <p>11 by the parties hereto, or financially interested in the</p> <p>12 action.</p> <p>13 CERTIFIED TO BY ME on this the 14th day of July,</p> <p>14 2016.</p> <p>15 <i>Dawn Baldwin</i></p> <p>16 _____</p> <p>17 DAWN BALDWIN, Texas CSR</p> <p>18 Expiration Date: 12/31/16</p> <p>19 U.S. LEGAL SUPPORT, Firm #343</p> <p>20 5910 N. Central Expressway, Suite 100</p> <p>21 Dallas, Texas 75206</p> <p>22 (214) 741-6001</p> <p>23</p> <p>24</p> <p>25</p>

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